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## FACSIMILE COVER SHEET

Date: February 15, 2007

TO	Firm and City	Telephone	Facsimile
The Commissioner of Patents	United States Patent and Trademark Office Alexandria, Virginia, United States of America		571 273 2885

FROM	Telephone	Facsimile
Tai W. Nahm tnahm@tor.fasken.com	416 868 3362	416 364 7813

Pages (including cover): 4

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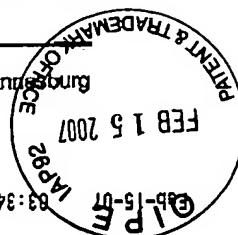
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number	10/005,166
Filing Date	12/07/2001
First Named Inventor	MIHELJIC, Joe
Art Unit	2622
Examiner Name	LAM, Hung H.
Attorney Docket Number	3342077-0005 (228512.00005)

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Notice of Allowance and Fees Due PTOL-85 Payment of Issue Fee Payment of Publication Fee Credit Card Payment Form PTO-2038
<b>Remarks</b>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Fasken Martineau DuMoulin LLP		
Signature			
Printed name	Tai W. Nahm		
Date	February 16, 2007	Reg. No.	54,906

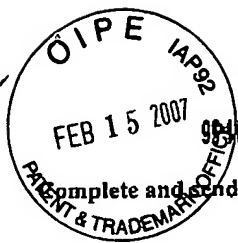
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Typed or printed name	Tai W. Nahm	Date	February 15, 2007

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02/16/2007 TTRAN2 00000011 10005166

01 FC:2501 700.00 OP	02 FC:1504 700.00 OP			
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.

10/005.166 12/07/2001 Joe Mihelcic 3342077-0005 9856

TITLE OF INVENTION: METHOD AND SYSTEM FOR COMPLETE 3D OBJECT AND AREA DIGITIZING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	02/16/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
LAM, HUNG H	2622	348-373000

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE <u>MIHELIC, JOE</u>	(B) RESIDENCE: (CITY and STATE OR COUNTRY) <u>BRAMPTON, CANADA</u>
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Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☐ Corporation or other private group entity ☐ Government

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Authorized Signature: <u>Tai W. Nahm</u>	Date: <u>Feb. 15, 2007</u>
Typed or printed name: <u>TAI W. NAHM</u>	Registration No. <u>54,906</u>

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